



		ATTORNEY'S DOCK	KET NO.: INNOFF 3.0-011			
As a below-named inventor, I hereby d						
My residence, mailing address and citizens	hip are as stated below next to my na	ame;				
I believe I am the original, first and sole i	nventor (if only one name is listed b	below) or an original, first and join	nt inventor (if plural names are			
listed below) of the subject matter which is						
CONFIGURABLE MOUNT FO	<u>IR A PERIPHERAL DEVI</u>	E the specification of which				
is attached hereto						
was filed on as Un	ited States Application Number or P	CT International Application Num	iber and was amended			
on (if applicable).						
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.						
I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) of any foreign application(s) for patent or inventor's						
certificate or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed						
below and have also identified below any foreign application for patent or inventor's certificate, or any PCT international application having a						
	filing date before that of the application on which priority is claimed:					
PRIOR FOREIGN APPLICATION(S	3)					
TRIOR POREIGN ATTEICATION		DATE OF FILING				
COUNTRY	APPLICATION NUMBER	(month, day, year)	PRIORITY CLAIMED			
			YES 🔲 NO 🗌			
			YES 🗌 NO 🗌			
			YES 🗌 NO 🗌			
LISTING OF EODEIGN A PRI ICATIO	NS CONTINUED ON DAGE 3 HER	EOF YES NO				
LISTING OF FOREIGN APPLICATIONS CONTINUED ON PAGE 3 HEREOF YES NO						
I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:						
Application Number:		Filing Date:				
Application Number:		Filing Date:				
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:						

U.S. Parent Application Serial Number:

Parent Filing Date:

Parent Patent No.:

U.S. Parent Application Serial Number:

Parent Filing Date:

Parent Patent No.:

PCT Parent Number:

Parent Filing Date:

LISTING OF US APPLICATIONS CONTINUED ON PAGE 3 HEREOF: YES NO

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 000530

DIRECT ALL CORRESPONDENCE TO: Customer No. 000530



DECLARATION -- Page 2



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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole	or first inventor (given name, family name): ODD N. ODDSEN, JR		
Inventor's signature		Date	
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Second Inventor	's signature	Date	
Residence: Mailing Address:	Citizenship:		
Full name of third	l joint inventor, if any (given name, family name):		
Third Inventor's signature		Date	
Residence: Mailing Address:	Citizenship:		
Full name of four	th joint inventor, if any (given name, family name):		
Fourth Inventor	's signature	Date	
Residence: Mailing Address:	Citizenship:		
Full name of fifth	joint inventor (given name, family name):		
Fifth Inventor's	signature	Date	
Residence: Mailing Address:	Citizenship:		
Full name of sixtl	n joint inventor, if any (given name, family name):		
Sixth Inventor's	signature	Date	
Residence: Mailing Address:	Citizenship:		
Full name of seve	nth joint inventor, if any (given name, family name):		
Seventh Inventor	r's signature	Date	
Residence:	Citizenship:		
Mailing Address:			
Full name of eigh	th joint inventor, if any (given name, family name):		
Eighth Inventor	s signature	Date	
Residence: Mailing Address:	Citizenship:		
☐ Additional inv	ventors are being named on separately numbered sheets attached hereto.		